FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:

3235-0076

Expires:

March 15, 2009

Estimated average burden Hours per response: 4.00

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TEMPORARY FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is ar UBS Global Alpha Strategies Limited	n amendment and name has changed, and indicate change.) Wannight De
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section	4(6) ULOE
Type of Filing: ☐ New Filing ☐	Amendment	PER AND DESCRIPTION OF THE PROPERTY OF THE P
	· A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about t	he issuer	
Name of Issuer (check if this is an arm	endment and name has changed, and indicate change.)	09035409
UBS Global Alpha Strategies Limited		
Address of Executive Offices (Number and	d Street, City, State, Zip Code) 52 Grand Cayman, KY1-1103 Cayman Islands	Telephone Number (Including Area Code)
	(Number and Street, City, State, Zip Code)	(345) 914-1060 Telephone Number (Including Area Code)
(if different from Executive Offices)	(Clamber and Street, Sity, State, 21p Code)	receptions realises (including rives code)
Brief Description of Business To open	rate as a private investment fund. PRO	CESSED
Type of Business Organization	A4AD	9.6.2000
corporation	WAR limited partnership, already formed ⊠ other (ple	2 6 2009 ase specify): A Cayman Islands exempted company
	ያሀሰብስር	ON REUTERS
business trust	limited partnership, to be formed	Minimum —
· ·	Month Year	_
Actual or Estimated Date of Incorporation		
Jurisdiction of Incorporation or Organizati	on (Enter two-letter U.S. Postal Service abbreviation for S	
	CN for Canada; FN for other foreign jurisdiction)	<u>_ FN</u>
239.500) only to issuers that file with the 6 format on or after September 15, 2008 but	is is a special Temporary Form D (17 CFR 239.500T) that Commission a notice on Temporary Form D (17 CFR 239 before March 16, 2009. During that period, an issuer also user must file amendments using Form D (17 CFR 239.500	.500T) or an amendment to such a notice in paper or may file in paper format an initial notice using Form
Who Must File: All issuers making an of	fering of securities in reliance on an exemption under Rep	gulation D or Section 4(6), 17 CFR 230.501 et seq. or
15 U.S.C. 77d(6).		
Securities and Exchange Commission (SF	ater than 15 days after the first sale of securities in the off C) on the earlier of the date it is received by the SEC at the	ering. A notice is deemed filed with the U.S.
after the date on which it is due, on the dat	te it was mailed by United States registered or certified ma	ail to that address.
Where to File: U.S. Securities and Excha	inge Commission, 450 Fifth Street, N.W., Washington, D.	.C. 20549.
Copies Required: Two (2) copies of this	notice must be filed with the SEC, one of which must be	manually signed. Any copies not manually signed
	ed copy or bear typed or printed signatures. st contain all information requested. Amendments need o	anly report the name of the issues and offering any
changes thereto, the information requested	I in Part C, and any material changes from the information	nny report the name of the issuer and offering, any
Appendix need not be filed with the SEC.		providesty supplied in Fato 11 and 27 and 27 and 11 and 110
Filing Fee: There is no federal filing fee.		
State: This notice shall be used to indicate relian.	ce on the Uniform Limited Offering Exemption (ULOE) i	for golds of googypities in the constant that have advant
ULOE and that have adopted this form. Is	suers relying on ULOE must file a separate notice with the	te Securities Administrator in each state where sales
are to be, or have been made. If a state rec	uires the payment of a fee as a precondition to the claim	for the exemption, a fee in the proper amount shall
accompany this form. This notice shall be	filed in the appropriate states in accordance with state law	w. The Appendix to the notice constitutes a part of this
notice and must be completed.	ATTENTION	
Failure to file notice in the appropriate stat	tes will not result in a loss of the federal exemption. Conv	versely, failure to file the appropriate federal
notice will not result in a loss of an availab	ple state exemption unless such exemption is predicated or	n the filing of a federal notice.

				A. BASIC IDEN	TIFICATION DATA		<u></u>
	Ľ.	tar the informatic	on requested for the			··· <u>-</u>	
2.			-	issuer has been organized	within the past five years:		
	0	•			or direct the vote or disposition	of 10% or more of	a class of equity securities
	0	of the issuer:					
	o	Each executive	e officer and directo	or of corporate issuers and o	of corporate general and manage	ging partners of part	nership issuers; and
	o	Each general a	nd managing partn	er of partnership issuers.			
Check E	Box(e	s) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	Management Board Member
Full Na	me (1	ast name first, if	findividual)				
Douglas	s, Ric	hard E.			<u> </u>		
		Residence Addre		and Street, City, State, Zip			
c/o UB	SE	Iouse, 227 El	lgin Avenue, F	O. Box 852 Grand	Cayman, KY1-1103, C		
Check I	Box(e	s) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	Management Board Member
Full Na	me (I	_ast name first, it	f individual)		-		
Ferri, W			,				
Busines	s or l	Residence Addre	ss (Numbe	r and Street, City, State, Zij	Code)		
c/o UB	S F	Iouse, 227 E	lgin Avenue, F	O. Box 852 Grand	Cayman, KY1-1103, C	Cayman Islands	
Check I	Box(e	es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	Management Board Member
		Last name first, is Villiam E.J.	f individual)			<u></u> ,	
Busines	s or	Residence Addre	ss (Numbe	r and Street, City, State, Zi	p Code)		
c/o UE	S F	Iouse, 227 E	lgin Avenue, F	P.O. Box 852 Grand	Cayman, KY1-1103, C	Cayman Islands	
Check I	Box(e	es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	Management Board Member
Full Na	me (Last name first, i	f individual)	<u> </u>			· · · ·
Busines	ss or	Residence Addre	ess (Numbe	r and Street, City, State, Zi	p Code)		
Check	Box(e	es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	Management Board Member
Full Na	me (Last name first, i	f individual)	<u>. </u>		<u> </u>	
Busines	ss or	Residence Addre	ess (Numbe	r and Street, City, State, Zi	p Code)		10
Check 1	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	Management Board Member
Full Na	me (Last name first, i	f individual)				
Busines	ss or	Residence Addre	ess (Numbe	r and Street, City, State, Zi	p Code)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В. І	NFORMA'	TION ABO	OUT OFFE	RING				
1.	A What is	nswer also	in Appendum investn	lix, Columinent that w	tend to sell a 2, if filing	to non-acc under ULG ted from ar ctors to acc	redited inv OE. ny individu	estors in th	is offering			No ⊠ 0,000.00*	
		ubject to ti	ic disciclio	n or the bo	and or Dire	ctors to acc	ept tesser t	inounc.			Yes	No	
3.	Does th	e offering	permit join	t ownership	of a single	e unit		,			🛛		
4.	remune	ration for s f a broker o to be liste	solicitation or dealer re	of purchase gistered wit	ers in conne th the SEC	o has been ection with and/or with a broker or	sales of sec a state or	curities in tl states, list t	he offering. he name of	If a perso the broker	n to be liste or dealer.	ed is an asset If more that	ociated person in five (5)
Full Na	ime (Last	name first	, if individ	uai)									
Busine	ss or Res	idence Ado	iress (Num	ber and Str	eet, City, S	tate, Zip Co	ode)						
Name o	of Associ	ated Broke	r or Dealer						•				
				icited or In dividual St		licit Purcha	isers					☐ All	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Na	ame (Lasi	name first	ı, if individ	ual)									
Busine	ss or Res	idence Ado	dress (Num	ber and Str	eet, City, S	tate, Zip Co	ode)						
Name o	of Associ	ated Broke	r or Dealer							• •			
				licited or In dividual St		olicit Purcha	asers					☐ All	States
	[AL] [IL] [MT] [RI]	(AK) [IN] [NE) [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	(CO) (LA) (NM) (UT)	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[1D] [MO] [PA] [PR]
Full Na	ame (Las	t name firs	t, if individ	ual)									
Busine	ss or Res	idence Ade	dress (Num	ber and Str	eet, City, S	tate, Zip Co	ode)			<u>.</u>			
Name (of Associ	iated Broke	er or Dealer	7		-		*****					
				licited or Ir dividual St		olicit Purch	asers					☐ AI	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already "none" or "zero". If the transaction is an exchange offering, check this box [] and indicate in the c the securities offered for exchange and already exchanged.	sold. Enter "0" if answolumns below the amo	wer is ounts of
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity		\$16,561,942.16
	[X] Common [] Preferred		
	Convertible Securities (including warrants)	\$0	\$0
	Partnership Interests		\$0
	Other (Specify)		\$0
	Total		\$16,561,942.16
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this or amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	purchased securities a	Aggregate Dollar Amount of Purchases
	Accredited Investors	12	\$16,561,942.16
	Non-accredited Investors	0	\$0
3.	Total (for filing under Rule 504 only)	es sold by the issuer, to	o date, in rities by
		Type of Security	
	Type of Offering		Sold
	Rule 505		- 3
	Regulation A		3
	Rule 504		<u>\$</u>
	Total		\$ clude
4.	amounts relating solely to organization expenses of the issuer. The information may be given as subthe amount of an expenditure is not known, furnish an estimate and check the box to the left of the e	ject to future continge	encies. If
	Transfer Agent's Fees	[] \$0
	Printing and Engraving Costs	[X] <u>\$*</u>
	Legal Fees	[X	\$*
	Accounting Fees	[X] <u>\$*</u>
	Engineering Fees	[\$0
	Sales Commissions (specify finders' fees separately)] \$0
	Other Expenses (identify)] \$*
	Total		 :
	*All offering and organizational expenses are estimated not to exceed \$250000.		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Indicate below the amount of the adjusted gross proceeds to the is purposes shown. If the amount for any purpose is not known, furrestimate. The total of the payments listed must equal the adjusted C - Question 4.b above.	nish an esti	mate a	nd ch	eck the box to the le	eft of t	he e to P	'art
					Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees		[]	\$	[]	\$
	Purchase of real estate	***********	E]	\$	[]	\$
	Purchase, rental or leasing and installation of machinery and equip	pment	[1	\$	ſ]	\$
	Construction or leasing of plant buildings and facilities		[]	\$	[]	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assessecurities of another issuer pursuant to a merger)		[]	\$	Į)	\$
	Repayment of indebtedness		[]	\$	ĺ]	\$
	Working capital		[]	\$	[1	\$
	Other (specify): Investment Capital		{	х ј	\$999,750,000.00	[]	\$
	Total Payments Listed (column totals added)	*******			[X] \$9	99,750	000,0	.00
	D. FED	ERAL SIC	NAT	URE	·		_	
gna	issuer has duly caused this notice to be signed by the undersigned ture constitutes an undertaking by the issuer to furnish to the U.S. mation furnished by the issuer to any non-accredited investor purs	. Securities suant to par	and E agrap	xchan h (b)(2	ige Commission, up	ed un on wr	der R itten	tule 505, the following request of its staff, the
suc	er (Print or Type)	Signature	/	/	2		Dat	e
	Global Alpha Strategies Limited	<u> </u>		//				3-6-09
				/ /	r Tuna)			
BS	e of Signer (Print or Type)	Title of Sig	ner (F	rint o	i Type)			•

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 10001.)

	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?
	See Appendix, Column 5, for state response. Not applicable
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. Not applicable
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. Not applicable
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. Not applicable
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned y authorized person.
lss	uer (Print or Type) Signature Date
U	3 - 6 - 09 3S Global Alpha Strategies Limited
Na	me (Print or Type) Title (Print or Type)

Director

Instruction:

William J. Ferri

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

UBS GLOBAL ALPHA STRATEGIES LIMITED

1	2		3		4				5	
,	Intend to non-acc investo Sta (Part B-	o sell to redited ors in te	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Class {A/B} Shares Par Value U.S. \$0.01 Per Share	Number of Non-Accredited Accredited		Amount	Yes	No		
	 		\$1,000,000,000		· - -					
AK	ļ					<u> </u>				
AL						<u> </u>				
AR]					 			
AZ CA						1				
CO	-						 		-	
ст				<u> </u>		<u> </u>				
DC	<u> </u>			<u></u>		<u> </u>				
DE	 						-	<u> </u>		
FL	 	х	X	8	\$4,852,488.00	0	0	·		
GA	<u> </u>									
н				<u></u>						
IA	 								****	
ID			_	<u> </u>					1	
1L				<u> </u>						
IN										
KS										
KY										
LA										
MA		Х	х	3	\$11,070,367.74	0	0			
MD										
ME										
MI										
MN										
МО										
MS									ļ <u> </u>	
МТ									ļ	
NC	1			ļ						
ND										
NE	ļ	<u> </u>						ļ		
NH		<u> </u>		<u> </u>	_	L		<u> </u>		

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APPENDIX

IIBS GLOBAL ALPHA STRATEGIES LIMITED

UBS GLOBAL ALPHA STRATEGIES LIMITED										
1	Intend to non-accoinvest Sta (Part B-	o sell to redited ors in	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of i	5 Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)					
State	Yes	No	Class {A/B} Shares Par Value U.S. \$0.01 Per Share \$1,000.000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
NJ					<u> </u>					
NM	<u></u>									
NV	<u> </u>	ļ						_		
NY		х	х	1	\$639,086.42	0	0		ļ	
ОН					<u>. </u>					
ок										
OR	<u></u>	<u> </u>								
PA							ļ			
PR						ļ <u></u>				
RI							ļ	<u> </u>		
SC	<u> </u>							Ī		
SD	ļ .	ļ					 		ļ. ·	
TN									ļ	
TX	1			<u> </u>		1		-		
UT	 					 				
VA					·	1				
VI	ļ				· • -	1			<u> </u>	
VT						 - -				
WA	 						 		-	
WI	 							<u> </u>		
WV_	 						<u>_</u>			
WY		<u> </u>					<u> </u>	<u> </u>		

 \mathbb{END}